

COMMERCIAL

TENANT FIT-UP WITH
NO INTERIOR CONSTRUCTION

Town of Brookfield

Procedure for Obtaining a Building Permit

****PLEASE READ CAREFULLY****

Failure to comply with these requirements will delay the review of your application.

The Permit Application documents must be completed in ink or typed. The following is a list of the documents and information that must be submitted in order to process your application. The Land Use Office staff will ensure that the materials are distributed to each of the Land Use departments for review.

Commercial – No Interior Construction Document Checklist

- Tax Collector Sign-off
- Permit Application for Tenant Fit-Up with No Interior Construction
- Permitted Commercial Use Application for Certificate of Zoning Compliance
- If property is within the Aquifer Protection District, the Supplemental Application for CZC in the Aquifer Protection District must be completed
- Re-inspection fee acknowledgement
- Letter of Authorization
- Water Pollution Control Authority review form
- Fire Marshal plan review sheet
- 4 Drawings of floor layout including location of the following:
 - fire extinguishers
 - fire alarms
 - smoke detectors
 - emergency lights
 - exit signs
 - location of Knoxbox key or box
 - drinking water dispensers, if any
 - toilets and signs for these
 - sidewalks, front entry, stairs, elevators
 - handicap accessibility
- Interior finish ratings
- Rating of tenant separation walls
- Fees (includes Certificate of Zoning Compliance fee, Health Plan review fee, Certificate of Occupancy fee)

A schedule of building fees is available separately.

Building Permit # _____

Activity #: _____

TOWN OF BROOKFIELD DEPARTMENT APPROVAL CHECKLIST

Property UID# _____

Property Address: _____

Project Description: _____

Applicant: _____ Phone #: _____

Owner of Record: _____ Phone #: _____

Subdivision Name: _____ Developer's Lot # _____

The applicant is responsible for obtaining all required signatures

Department	Approved By:	Date	Comments/Stipulations
1. Tax Collector			
2. Historic District 775-2538			
3. Candlewood Shores 775-1172			
4. Public Works Dept.			
5. Inland Wetlands			
6. Zoning			
7. Health Department			
8. WPCA			
9. Fire Marshal			Read & Sign Review Sheet
10. Building Dept.			

FINAL APPROVALS

1. Historic District 775-2538			
2. Inland Wetlands			
3. Zoning Compliance Certificate			
4. Health Dept			
5. WPCA			
6. Fire Marshal Final Inspection			

**** The Building Dept., will schedule a final inspection after receipt of this completed checklist and a request for a final inspection. ****

7. Building Dept.** Final Inspection			
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Tax Collector

____ Approved ____ Denied

____ Date: ____

Permit Fee: \$ _____ + State Fee: _____ = Total Fee: \$ _____

PERMIT #: _____

This Item For Office Use

Town of Brookfield
PERMIT APPLICATION
for TENANT FIT-UP with NO INTERIOR CONSTRUCTION

APPLICATION DATE: _____

PROPERTY ID#: _____

Property Street Address:		
Property Owner Name:		Phone:
Business Name:		Type of Business:
Business Owner Name:		Phone:
Applicant Name:		Phone:

REQUIRED DOCUMENTATION:

- ☐ Approved Certificate of Zoning Compliance
- ☐ Fire Ratings of All Interior Finishes
- ☐ Floor Plan of Structure Including Business Names & Use Type of All Adjacent Units
- ☐ Exit Sign & Emergency Lighting Plan

PROPOSED USE:

- | | | |
|---|--|--|
| <input type="checkbox"/> ASSEMBLY | <input type="checkbox"/> FACTORY | <input type="checkbox"/> STORAGE |
| <input type="checkbox"/> Theatre | <input type="checkbox"/> High Hazard | <input type="checkbox"/> High Hazard |
| <input type="checkbox"/> Night Club | <input type="checkbox"/> Moderate Hazard | <input type="checkbox"/> Moderate Hazard |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Low Hazard | <input type="checkbox"/> Low Hazard |
| <input type="checkbox"/> Church | | |
| <input type="checkbox"/> Other Assembly | <input type="checkbox"/> EDUCATIONAL | <input type="checkbox"/> MERCANTILE |
| | <input type="checkbox"/> Grades 1-12 | <input type="checkbox"/> <u>OTHER</u> |
| | <input type="checkbox"/> Day Care | |

STRUCTURAL FRAME

- ☐ Steel
- ☐ Masonry
- ☐ Concrete
- ☐ Wood
- ☐ Other (identify)

EXTERIOR WALLS

- ☐ Steel
- ☐ Masonry
- ☐ Concrete
- ☐ Wood
- ☐ Other (identify)

Describe ALL interior changes proposed (includes wall finishes, carpet, etc.):



TOWN OF BROOKFIELD

COMMERCIAL USE APPLICATION

FOR CERTIFICATE OF ZONING COMPLIANCE

ACTIVITY # _____ PROPERTY I.D. # _____

APPLICANT/AGENT:

LANDOWNER OF RECORD:

Name: _____ Name: _____
Address: _____ Address: _____
Contact Name: _____ Contact Name: _____
Phone: _____ Phone: _____
Cell Phone/E-Mail: _____ Cell Phone/E-mail: _____

SITE DATA

Street Address: _____
Zoning District: _____
Unit I.D. # _____
Business Name: _____
Permitted Use Classification: _____
Flood Plain Designation: _____

DESCRIPTION OF BUSINESS:

USE DATA:

No. of Employees: _____
Total Building Square Footage: _____
Unit Area Occupied Square Footage: _____
Total number of parking spaces for building: _____
Total number of parking spaces assigned to this business: _____
Is hazardous material employed? _____
Are any site changes contemplated? _____

If not, fill out HAZMAT questionnaire.

If so, a Design Review Modification is required.

Comments:

I represent that this information is current, accurate and complete and that the work will be completed in accordance with the regulations. I certify that I am the designated agent for this project.

Signature: _____
Applicant

Signature: _____
Property Owner

B. Zoning compliance certificate: [amended 2/24/75 & 2/28/85]

- (1) A Zoning Compliance Certificate must be obtained from the Zoning Commission to ensure compliance with the Zoning Regulations of the Town of Brookfield before:
 - (a) Any building or structure is occupied;
 - (b) A permitted use commences operations for the purpose intended;
 - (c) Any permitted use is changed to another permitted use; or
 - (d) Any land use is employed.
- (2) Application for a Zoning Compliance Certificate shall be submitted on such forms as may be prescribed by the Commission and shall be accompanied by a plot plan certified by a land surveyor/engineer licensed to practice in the State of Connecticut. The fees associated with the various types of Zoning Compliance Certificates shall be in accordance with the Zoning Commission Fee Schedule (see appendix) which may be revised from time to time to reflect current administrative costs. [Amended 2/24/75, 2/28/85, 8/23/01]

Activity #: _____
(for office use only)

TOWN OF BROOKFIELD
SUPPLEMENTAL APPLICATION
CERTIFICATE OF ZONING COMPLIANCE –
FOR NON RESIDENTIAL PROPERTY
WITHIN THE AQUIFER PROTECTION DISTRICT

Property ID#: _____ Date: _____

Street Address: _____ Zone: _____

If your application for a Certificate of Zoning Compliance involves property located within the AQUIFER PROTECTION DISTRICT, you are required to supply the following additional information:

1. Describe the operations conducted within your building(s) and on your site:

2. Do your operations involve the generation, storage, use, and disposal of Hazardous and Contaminant Materials as defined in Section 242-202 of the Brookfield Zoning Regulations? (See reverse side for definitions). ☐ YES ☐ NO

3. If you answered "YES" to 2., above, you are required to submit a Hazardous and Contaminant Materials Control Plan per Section 242-502 G. 8. (A Sample plan is available from the Brookfield Land Use Department) Approval of this plan is required by the Brookfield Zoning Commission before a certificate can be issued.

4. If you have a current permit(s) for this material from the Connecticut Department of Environmental Protection, identify as follows or write "none:"

Type	Permit I.D. No.	Effective Date	Expiration Date
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Storage: _____

Generation: _____

Use: _____

Disposal: _____

Other: _____

Applicant's	Name	_____	Signature	_____
Owner's	Name	_____	Signature	_____

Hazardous and Contaminant Materials Control Plan Approved:

By: _____ Date: _____

HAZARDOUS MATERIALS [eff. 1/2/00]

Hazardous or contaminant material shall mean any substance or combination of substances which, because of quantity, concentration, or physical, chemical or infectious characteristics pose a significant or potential hazard to water supplies or to human health if disposed into or on any land or water, including groundwater. Any substance deemed a "hazardous waste" under the Connecticut General Statutes or Regulations of Connecticut State Agencies shall be deemed a hazardous or contaminant material for the purposes of these Regulations. Hazardous and contaminant materials include, but are not limited to, the following:

- a) Substances which are toxic, flammable corrosive, explosive, radioactive or infectious.
- b) Substances listed in the U.S. Environmental Protection Agency's "Title III Of Lists- Chemical subject to Reporting under Title III of the Superfund Amendments and Reauthorization Act (SARA) of 1986."
- c) Acids and Alkalis outside the pH range of 2 to 10.
- d) Petroleum products, including fuels and waste oils.
- e) Synthetic organic chemicals.
- f) Any solid material which if exposed to water will leach or dissolve to form a hazardous or contaminant material as defined above.
- g) For the purposes of this regulation, pharmaceuticals, medicines and drugs are only considered "hazardous materials" when they are regulated as such by the Department of Environmental Protection (DEP). Definitions of activities, operations, uses, factors and similar terminology relating to hazardous and contaminant materials shall be as defined by the appropriate DEP literature.

TO CONTRACTORS:

CT. General Statutes (effective January 1, 2005):

§20-338b Building permit applications. Who may sign.

Any licensed contractor who seeks to obtain a permit from a building official may sign the building permit application personally or delegate the signing of the building permit application to an employee, subcontractor or other agent of the licensed contractor, provided, the licensed contractor's employee, subcontractor or other agent submits to the building official a dated letter on the licensed contractor's letterhead, signed by the licensed contractor, stating that the bearer of the letter is authorized to sign the building permit application as the agent of the licensed contractor. The letter shall not be a copy or facsimile, but shall be an original letter bearing the original signature of the licensed contractor. The letter shall also include:

1. The name of the municipality where the work is to be performed;
2. The job name or a description of the job;
3. The starting date of the job;
4. The name of the licensed contractor;
5. The name of the licensed contractor's agent; and
6. The license numbers of all contractors to be involved in the work.

Town of Brookfield
Land Use Office
100 Pocono Rd.
Brookfield, CT 06804

ATTENTION PERMIT HOLDER

****It is the responsibility of the permit holder or agent to call for inspections (minimum 24 hours in advance). The permit holder is responsible for all construction for that project. An oversight of code requirement(s) during plan review does not relieve you of your responsibility for compliance. During inspections, you may be required to make changes to insure that the current building & fire codes are satisfied.****

- Per Chapter 127 of the Brookfield Code of Ordinances:

Building Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to the issuance of a Certificate of Occupancy.

- Per Chapter 242 of the Brookfield Code of Ordinances:

Site Stabilization Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to bond release.

I acknowledge that per the Brookfield Code of Ordinances, I will be responsible for reinspection fees as outlined above. I also understand that it is my responsibility to call for inspections of the project.

Applicant/Agent signature

Date

Letter of Authorization

To the Town of Brookfield:

I hereby declare the following:

- 1) That I am the owner of the premises described as follows:

Street Address

City

State

Zone

- 2) That I, _____, as property owner will act as general contractor.

OR

That _____ is duly authorized for and on behalf of the owner to execute an application for building permits to enable him/her to obtain permits to complete construction of the following work:

- 3) That _____ is hereby designated as the owner's representative with whom all town departments may deal with in respect to the work involved.

Date: _____

Owner: _____
Print Name Signature

BROOKFIELD WATER POLLUTION CONTROL AUTHORITY

100 Pocono Road, Brookfield, CT 06804 (203) 775-7319 Fax (203) 775-2614

☐ CHANGE OF OCCUPANCY ☐ TENANT FIT-UP ☐ ADDITION/RENOVATION

IS PROPERTY CONNECTED TO SEWER?

☐ YES
☐ NO (NO ACTION REQUIRED)
☐ UNSURE (CHECK WITH W.P.C.A. OFFICE)

LOCATION OF PROPOSED BUSINESS/RENOVATION

_____ UNIT # _____

TYPE OF OPERATION:

☐ FOOD PREPARATION
☐ FOOD SALES
☐ HAIR CARE
☐ PHOTOGRAPHY
☐ VEHICLE REPAIR
☐ HAZARDOUS CHEMICALS
☐ MANUFACTURING
☐ OTHER (PLEASE LIST) _____

ESTIMATED WATER USE PER DAY IN GALLONS _____

NUMBER OF EMPLOYEES, FULL TIME _____ PART TIME _____

HOURS OF OPERATION _____ TO _____ # OF DAYS PER WEEK _____

PREVIOUS TENANT OR BUSINESS _____

PRINTED NAME OF PROPERTY OWNER _____

PROPERTY OWNER'S SIGNATURE _____ DATE _____

CONTACT NAME _____ PHONE # _____

W.P.C.A. SIGN OFF: ☐ APPROVED ☐ DENIED ☐ OTHER

COMMENTS _____

W.P.C.A. SIGNATURE _____ DATE _____

Contacted by: _____ Date: _____ via: _____
Contacted by: _____ Date: _____ via: _____
Contacted by: _____ Date: _____ via: _____

**Town of Brookfield
Fire Marshal's Office**

Fire Marshal: Wayne Gravius

Assistant Fire Marshal: Gary Gramling

Phone: 203-775-7306 **Fax:** 203-740-7677

PLAN REVIEW INFORMATION

Application #: _____

Property ID#: _____

Address: _____

APPLICANT/AGENT :

Name: _____

Address: _____

Contact: _____

Phone #: _____

Builder: _____

Architect: _____

LAND OWNER OF RECORD:

Name: _____

Address: _____

Phone #: _____

Phone: _____

Phone: _____

This section for office use only:

Received Date: _____

Review Date: _____

☐ **Incomplete**

☐ **Complete**

Date Received Complete: _____

Plan review #: _____

Comments:

(OVER)

<p style="text-align: center;">Town of Brookfield Fire Marshal's Office</p>
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PROCEDURE FOR OBTAINING PERMITS

**Commercial, Industrial & Multiple Family Dwelling applications, and
Hotel/Motel Occupancies must be approved by
the Fire Marshal.**

Required Documents:

1. **Completed Building Permit application
(including necessary Commission/Dept. approvals)**
2. **2 sets of Site Plans**
3. **2 sets of Building Plans**
4. **Code Review of Occupancy –**
 - A. **International Fire Code**
 - B. **2003 HFPA Life Safety 101**
 - C. **NFPA 1 Uniform Fire Code**
 - D. **All International Codes Adopted by State of CT**
5. **ALL codes have State Amendments**

**If you have questions about these procedures, please make an
appointment with the Fire Marshal (203-775-7306).**

*** Please call the Fire Marshal's Office for all inspections ***

**** In accordance with the Open-Burning Law of the State of
Connecticut, there is to be NO BURNING of construction
material(s). A fine of \$100.00 will be imposed upon the property
owner if this law is violated. ****